

POSITION	ID NO.	DATE
CLASSIFIER		
EXAM'NER	31	11/8/97
TYPIST	MTA	1-24/97
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

BEST AVAILABLE COPY

INDEX OF CLAIMS

Claim	Final	Original	Date
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SYMBOLS

- ✓ ..... Rejected
- ✗ ..... Allowed
- (Through number) ..... Cancelled
- + ..... Restricted
- N ..... Non-elected
- I ..... Interference
- A ..... Appeal
- O ..... Objected

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